Form 424 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

FAX: 512/463-5709

Filing Fee: See instructions



Certificate of Amendment

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texas
JAN 05 2017

Corporations Section

Entity Information			
The name of the filing entity is:			
Frazier Asset Management, LLC			
State the name of the entity as currently shown in the red of the entity, state the old name and not the new name.	cords of the secretary of state. If the amendment changes the name		
The filing entity is a: (Select the appropriate entity type	below.)		
For-profit Corporation	Professional Corporation		
Nonprofit Corporation	Professional Limited Liability Company		
Cooperative Association	Professional Association		
☑ Limited Liability Company	☐ Limited Partnership		
The file number issued to the filing entity by the	ne secretary of state is: 0119293200		

Amendments

1. Amended Name

(If the purpose of the certificate of amendment is to change the name of the entity, use the following statement)

The amendment changes the certificate of formation to change the article or provision that names the filing entity. The article or provision is amended to read as follows:

The name of the filing entity is: (state the new name of the entity below)

B. Frazier Management, The TAC

The date of formation of the entity is:

The name of the entity must contain an organizational designation or accepted abbreviation of such term, as applicable.

01/01/2017

2. Amended Registered Agent/Registered Office

The amendment changes the certificate of formation to change the article or provision stating the name of the registered agent and the registered office address of the filing entity. The article or provision is amended to read as follows:

Regu	stered Agent	mntete C)	
(Complete either A or B,			
A. The registered agent is an organization (cannot be entity named	above) by the na	me of:
			
OR B. The registered agent is an individual resi	ident of the state v	vhose name is:	· /
B. The registered agent is an individual less	Ment of the state v	711000 Handa 151	
First Name M.L.	Last Name		Sufftx
The person executing this instrument affirms t	hat the person de	signated as the	new registered agent
has consented to serve as registered agent.		,	
	1 11	i affina addrone	/ic:
C. The business address of the registered agent	and the registered	1 Office address	3 13.
			TX
Street Address (No P.O. Box)	City		State Zip Code
Speet Address (NO P.O. DW)	• •		
3. Other Added, Alt	haved or Deleted	Provisions	
Other changes or additions to the certificate of formation	may be made in the	space provided be	elow. If the space provided
is insufficient, incorporate the additional text by provide	ng an attachment to	his form. Please	read the manuchons to this
form for further information on format.			
Text Area (The attached addendum, if any, is incorporated herein	n by reference.)		
		notion Though	entification or
Add each of the following provisions to the	ceruricate of form	nation. The loc	CHATTOTHON OF
reference of the added provision and the full ter	rt are as follows:		
· ·			
	/		
			1
Alter each of the following provisions of the	e certificate of for	rmation. The i	dentineation or
reference of the altered provision and the full to	ext of the provision	n as amended a	are as ioliows:
Delete each of the provisions identified bel	ow from the certif	ficate of format	ion.
	•		•
1 "/			

Statement of Approval

The amendments to the certificate of formation have been approved in the manner required by the Texas Business Organizations Code and by the governing documents of the entity.

7

Effectiveness of Filing (Select either A, B, or C.)

	document is filed by the secretary of state. Interpretation and the secretary of state.
the date of signing. The delayed effective date is: C. This document takes effect upon the occurre passage of time. The 90 th day after the date of sign. The following event or fact will cause the document.	ning is:
	`
The analyzian ad signs this document subject to the	cution ne penalties imposed by law for the submission of a fies under penalty of perjury that the undersigned is the entity to execute the filing instrument.
	ignature of authorized person KATTY BOND rinted or typed name of authorized person (see instructions)

Form 424 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

FAX: 512/463-5709

Filing Fee: See instructions



Certificate of Amendment

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JAN 05 2017

Corporations Section

Entity Information				
The name of the filing entity is:				
Frazier Asset Management, LLC				
State the name of the entity as currently shown i of the entity, state the old name and not the new	n the records of the secretary of state. If the amendment changes the name name.			
The filing entity is a: (Select the appropriate en	atity type below.)			
For-profit Corporation	Professional Corporation			
☐ Nonprofit Corporation	Professional Limited Liability Company			
Cooperative Association	Professional Association			
☑ Limited Liability Company	Limited Partnership			
The file number issued to the filing enti-	ty by the secretary of state is: 0119293200			
	01/01/2017			

Amendments

1. Amended Name

(If the purpose of the certificate of amendment is to change the name of the entity, use the following statement)

The amendment changes the certificate of formation to change the article or provision that names the filing entity. The article or provision is amended to read as follows:

The name of the filing entity is: (state the new name of the entity below)

B. Frazier Management, The TAC

The name of the entity must contain an organizational designation or accepted abbreviation of such term, as applicable.

2. Amended Registered Agent/Registered Office

The amendment changes the certificate of formation to change the article or provision stating the name of the registered agent and the registered office address of the filing entity. The article or provision is amended to read as follows:

Regu	stered Agent	mntete C)	
(Complete either A or B,			
A. The registered agent is an organization (cannot be entity named	above) by the na	me of:
			
OR B. The registered agent is an individual resi	ident of the state v	vhose name is:	· /
B. The registered agent is an individual less	Ment of the state v	711000 Handa 151	
First Name M.L.	Last Name		Sufftx
The person executing this instrument affirms t	hat the person de	signated as the	new registered agent
has consented to serve as registered agent.		,	
	1 11	i affina addrone	/ic:
C. The business address of the registered agent	and the registered	1 Office address	3 13.
			TX
Street Address (No P.O. Box)	City		State Zip Code
Speet Address (NO P.O. DW)	• •		
3. Other Added, Alt	haved or Deleted	Provisions	
Other changes or additions to the certificate of formation	may be made in the	space provided be	elow. If the space provided
is insufficient, incorporate the additional text by provide	ng an attachment to	his form. Please	read the manuchons to this
form for further information on format.			
Text Area (The attached addendum, if any, is incorporated herein	n by reference.)		
		notion Though	entification or
Add each of the following provisions to the	ceruricate of form	nation. The loc	CHATTOTHON OF
reference of the added provision and the full ter	rt are as follows:		
· ·			
	/		
			1
Alter each of the following provisions of the	e certificate of for	rmation. The i	dentification or
reference of the altered provision and the full to	ext of the provision	n as amended a	are as ioliows:
Delete each of the provisions identified bel	ow from the certif	ficate of format	ion.
	•		•
1 "/			

Statement of Approval

The amendments to the certificate of formation have been approved in the manner required by the Texas Business Organizations Code and by the governing documents of the entity.

Effectiveness of Filing (Select either A, B, or C.)

A. This document becomes effective when the document is filed by the secretary of state. B. This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: C. This document takes effect upon the occurrence of a future event or fact, other than the passage of time. The 90 th day after the date of signing is: The following event or fact will cause the document to take effect in the manner described below:
Execution The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.
Date: 01/04/2017 By: Latty Boxp Signature of authorized person KATTY BOXD Printed or typed name of suthorized person (see instructions)

Form 301 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 \$12.463-5555 FAX: 512.463-5709 Filling Feet. See instruction



Application for Reinstatement And Request to Set Aside Tax Forfeiture

This space reserved for office use.

FILED
In the Office of the
Secretary of State of Texa

JAN 05 2017

Corporations Section

FAX: 512 463-5709 Filing Fee: See instructions		Forfeiture		Simple
I. The entity name is:		ASSET M		
The entity is a foreign entity the legal name stated above.	that was required to The name under w	o obtain its registre hich the entity is r	ition under a nam egistered is:	e that differs from
2. The file number issued to	the entity by the se	cretary of state is:	0119293200	1.53.20
3. The entity was forfeited o	r revoked under the	e provisions of the	Tax Code on:	02/08/19/1/2
4. The undersigned requests	that the forfeiture	or revocation of th	e entity be set asic	le, and certifies
a. The entity has filed each	enalty, and interest	imbosed siin mara	hapter 1/1 of the s due at the time of	of this application
as evidenced by the attached b. On the date of furfaiture an officer, director or sh	or revocation, the u	ndersigned person we-named for-pro	DT OL DIOTESSIVITOR	corporation; or
an officer, director, share	cholder of member ember of the above	or the above-name -named nonprofit	corporation; or	Sociation: Or
a member or manager of a parmer of the above-ne atrustee or beneficial ov	med limited name	TSHID: OF		, 15-01-5
	dditional Require	•	•	Section (Section)
Compreller of Public A Letter of Consent or An is no longer available.)	coounts Tax Clears nendment to Certifi	ance Letter cate of Formation	or Registration (R	3 3434 3
The undersigned declares	under nengity of	erjury, and the	penalties impos	ed by law for the
submission of a materially this request; that the statem obtained by providing false	taise or fraudulent ents contained her	in are true and co	ic minicipiemos is:	Christon Carlotter July 1
Date: 12/28/2016				contin
	BY:	Brian H. Ernzier		730TK 642
		Signature of authorize	d person (see instructio	os)
		Printed or typed name	of authorized person	

TEXAS COMPTROLLER of Public Accounts

P.O. Box 13528 . AUSTIN, TX 78711-3528



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15-4**-77**-11

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December 27, 2016

FRAZIER ASSET MANAGEMENT, INC. 3345 WESTERN CENTER BLVD STE 160 FORT WORTH, TX 76137-1938

TAX CLEARANCE LETTER FOR REINSTATEMENT*

To: Texas Secretary of State Corporations Section

Re: FRAZIER ASSET MANAGEMENT, INC. Taxpayer number: 30114686089 File number: 0119293200

The referenced entity has met all franchise tax requirements and is eligible for reinstatement through May 15, 2017.

KAYLENE ARMSTRONG ENFORCEMENT - ARLINGTON Field Operations - Enforcement (817)459-1155

You can file for reinstatement online at www.sos.state.tx.us/corp/sosda/index.shtml. Forms and instructions for reinstatement are available at www.sos.state.tx.us/corp/forms_option.shtml or by calling (512) 463-5555. This tax clearance letter must be attached to the reinstatement forms.

^{*}The reinstatement must be filed with the Texas Secretary of State on or before the expiration date of this letter. After this date, additional franchise tax filing requirements must be met, and a new request for tax clearance must be submitted.

TEXAS SECRETARY of STATE ROLANDO B. PABLOS

UCC | Business Organizations | Trademarks | Notary | Account | Help/Fees | Briefcase | Logout

BUSINESS ORGANIZATIONS INQUIRY - VIEW ENTITY

Filing Number: 119293200 **Entity Type:** Domestic For-Profit Corporation

Original Date of Filing: May 15, 1991 Entity Status: In existence

Formation Date: N/A

Tax ID:30114686089Duration:Perpetual

FEIN:

Name: B. Frazier Management, Inc

Address: 3345 WESTERN CENTER BLVD STE. 160 FORT WORTH, TX 76137-1938 USA

REGIS	TERED AGENT	FILING HISTORY	<u>NAMES</u>	MANAGEMENT	ASSUMED NAMES_	ASSOC ENTI	CIATED TIES
View Image	Document Number	Filing Type		Filing Date	Effective Date	Eff. Cond	Page Count
N/A	6222057	Articles Of Incorporation		May 15, 1991	May 15, 1991	No	N/A
N/A	6222058	Tax Forfeiture		August 17, 1993	August 17, 1993	No	N/A
N/A	6222059	Reinstatement		April 19, 1994	April 19, 1994	No	N/A
N/A	6222060	Tax Forfeiture		February 14, 1995	February 14, 1995	No	N/A
X	6222061	Reinstatement		September 21, 1995	September 21, 1995	No	2
X	6222062	Tax Forfeiture		February 19, 1997	February 19, 1997	No	1
X	6222063	Reversal of Tax Forfeiture		March 17, 1997	March 17, 1997	No	3
X	6222064	Change Of Registered Agent/Office		August 19, 1999	August 19, 1999	No	1
X	40613685527	Tax Forfeiture		August 22, 2003	August 22, 2003	No	1
X	41440770002	Reinstatement		September 8, 2003	September 8, 2003	No	2
X	50987980001	Public Information Report (PIR)		December 31, 2003	January 7, 2004	No	1
X	39068320001	Public Information Report (PIR)		December 31, 2003	July 31, 2003	No	1
X	95734734451	Tax Forfeiture		July 8, 2005	July 8, 2005	No	1
V	407317030001	Public Information Report (PIR)		December 31, 2010	February 4, 2012	No	1
V	401147710002	Reinstatement		December 16, 2011	December 16, 2011	No	2
X	465227968685	Tax Forfeiture		February 8, 2013	February 8, 2013	No	1
W.	751050060001	Public Information Report (PIR)		December 31, 2016	July 19, 2017	No	1
V	707471550002	Reinstatement		January 5, 2017	January 5, 2017	No	2
V	707472230002	Certificate of Amendment		January 5, 2017	January 5, 2017	No	3
₩.	778954290001	Public Information Report (PIR)		December 31, 2017	December 5, 2017	No	1

Order

Return to Search

Instructions:

To place an order for additional information about a filing press the 'Order' button.

Form 403 (Revised 05/11)

Submit in duplicate to: Secretary of State P.O. Box 13697 Austin, TX 78711-3697 512 463-5555

Filing Fee: \$15

FAX: 512/463-5709



Certificate of Correction

This space reserved for office use.

Entity Information

- 1. The name of the filing entity is:
- B. Frazier Management, Inc.

State the name of the entity as currently shown in the records of the secretary of state. If the certificate of correction corrects the name of the entity, state the present name and not the name as it will be corrected.

The file number issued to the filing entity by the secretary of state is: 11929320

Filing Instrument to be Correct	red
2. The filing instrument to be corrected is: Certificate of Amendment	ent
The date the filing instrument was filed with the secretary of state:	01/05/2017
	mm/dd/yyyy
Identification of Errors and Corre (Indicate the errors that have been made by checking the appropriate box or box The entity name is inaccurate or erroneously stated. The correcte	xes; then provide the corrected text.)
☐ The registered agent name is inaccurate or erroneously stated. The name is:	ne corrected registered agent
Corrected Registered Agent	
(Complete either A or B, but not both.)	the name of:
A. The registered agent is an organization (cannot be entity named above) by	y the name of.
OR	
B. The registered agent is an individual resident of the state whose n	ame is:
First Middle Last Name	Suffix

The person executing this certificate of correction affirms that the registered agent, whose name is being corrected by this certificate, consented to serve as registered agent at the time the filing instrument being corrected took effect.

Exh DEF002 - Page 11 of 12 ☐ The registered office address is inaccurate or erroneously stated. The corrected registered office address is: Corrected Registered Office Address TX Zip Code Street Address (No P.O. Box) City State ☐ The purpose of the entity is inaccurate or erroneously stated. The purpose is corrected to read as follows: ☐ The period of duration of the entity is inaccurate or erroneously stated. The period of duration is corrected to read as follows: **Identification of Other Errors and Corrections** (Indicate the other errors and corrections that have been made by checking and completing the appropriate box or boxes.) ☑ Other errors and corrections. The following inaccuracies and errors in the filing instrument are corrected as follows: Each of the following provisions was omitted and should be added to the filing instrument. The identification or reference of each added provision and the full text of the provision is set forth below. Alter The following identified provisions of the filing instrument contain inaccuracies or errors to be corrected. The full text of each corrected provision is set forth below: the name of the filing entity was incorrectly listed or identified as being Frazier Asset Management, LLC in the Certificate of Amendment. The name of the filing entity should have been Frazier Asset Management, Inc. No other changes are requested and the current name of B. Frazier Management, Inc. is correct. **Delete** Each of the provisions identified below was included in error and should be deleted.

Case 21-04071-elm Doc 44-2 Filed 03/29/22 Entered 03/29/22 13:06:59

Page 11 of 12

Defective Execution The filing instrument was defectively or erroneously signed, sealed, acknowledged or verified. Attached is a correctly signed, sealed, acknowledged or verified instrument.

Statement Regarding Correction

The filing instrument identified in this certificate was an inaccurate record of the event or transaction evidenced in the instrument, contained an inaccurate or erroneous statement, or was defectively or erroneously signed, sealed, acknowledged or verified. This certificate of correction is submitted for the purpose of correcting the filing instrument.

Correction to Merger, Conversion or Exchange

The filing instrument identified in this certificate of correction is a merger, conversion or other instrument involving multiple entities. The name and file number of each entity that was a party to the transaction is set forth below. (If the space provided is not sufficient, include information as an attachment to this form.)

Entity name		SOS file number		
Entity name		SOS file number		

Effectiveness of Filing

After the secretary of state files the certificate of correction, the filing instrument is considered to have been corrected on the date the filing instrument was originally filed except as to persons adversely affected. As to persons adversely affected by the correction, the filing instrument is considered to have been corrected on the date the certificate of correction is filed by the secretary of state.

Execution

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.

Date:			
12/11/17			
By:			
541			. 7
Signature of authorized person			
BRIAN H. FRAZIFA	11 <u>11</u> 11 11 11 11 11 11 11 11 11 11 11 11		# 1921 0 15 # # # # # # #
Printed or typed name of authorized person (see instructions)			

Form 403